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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/607,583
Filing Date	June 25, 2003
First Named Inventor	Kai Y. Xu
Title	Inotropic antibodies and
Art Unit	1644
Examiner Name	Z. Skelding
Attorney Docket Number	BBC6-08/134B

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☐ Practitioners associated with the Customer Number:

OR

☒ Practitioner(s) named below:

Name	Registration Number
Dr. Raj Bawa	51,385

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

OR

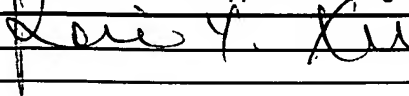
<input checked="" type="checkbox"/> Firm or Individual Name	Bawa Biotechnology Consulting LLC				
Address	21005 Starflower Way				
City	Ashburn	State	VA	Zip	20147
Country	USA				
Telephone	703-582-1745; 703-723-0034	Email	bawabio@aol.com		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	June 23, 2008
Name	Kai Y. Xu	Telephone	410-666-1761
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/607,583
Filing Date	June 25, 2003
First Named Inventor	Kai Y. Xu
Art Unit	1644
Examiner Name	Z. Skelding
Attorney Docket Number	BBC6-08/134A

I hereby revoke all previous powers of attorney given in the above-identified application.

☒ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number:

☒ Please change the correspondence address for the above-identified application to:

☐ The address associated with Customer Number:

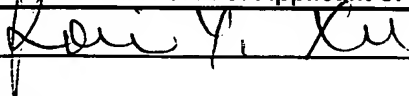
OR

<input checked="" type="checkbox"/> Firm or Individual Name	Dr. Raj Bawa Bawa Biotechnology Consulting LLC				
Address	21005 Starflower Way				
City	Ashburn	State	VA	Zip	20147
Country	USA				
Telephone	703-582-1745	Email	bawabio@aol.com		

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Signature			
Name	Kai Y. Xu		
Date	June 23, 2008	Telephone	410-666-1761

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